



Kansas Department of Health and Environment

Adult Care Home Program

FACT SHEET

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Now Available on the Internet

The *Fact Sheet* issues from January 1994 to the present are now available on the Kansas Department of Health and Environment home page on the Internet. The Internet address is www.state.ks.us/public/kdhe/bacc.html. Public libraries can assist individuals in accessing the Internet site if the individual does not have access to the Internet at work or at home.

The Bureau of Adult and Child Care (BACC) will continue to mail the *Fact Sheet* to nursing facilities, assisted living/residential health care facilities, and long term care units in hospitals. However, subscriptions will no longer be accepted for mailings to individuals and organizations. Previous copies of the *Fact Sheet* are available from BACC at \$5.00 a copy. Hospitals with swing beds may request to be placed on the mailing list for the *Fact Sheet*.

Administrator Guidelines to Prevent Elopement of Residents

A year ago the Bureau of Adult and Child Care began working with a committee composed of representatives selected by the three nursing facility and administrator associations. The purpose of the committee was to assist the department in developing a guideline administrators could use to evaluate a facility's policies and procedures to prevent elopement of residents. Attached to this issue of the *Fact Sheet* is a copy of the guideline developed by this group.

Since each nursing facility is unique, policies and procedures related to elopement must reflect those differences.

A copy of the check list surveyors use to assist in determining compliance decisions has been included with the guideline. The checklist reflects the issues identified in the guideline. Administrators are encouraged to carefully read the guideline and evaluate the systems in place in their facility to prevent elopement of residents who are cognitively impaired and/or lack good decision making abilities.

It should be noted that the most frequent cause of elopements found through the survey process is that staff who smoke outside the building turn off the alarms to exit the building and do not reset the alarms when they reenter the building. The development of effective systems to prevent the above occurrence would significantly reduce the number of elopements by residents.

The *Fact Sheet* is published by the Kansas Department of Health and Environment.

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New and Revised Regulation Interpretations

Included in this issue of the *Fact Sheet* are copies of two new and two revised regulation interpretations. The new regulation interpretations pertain to assisted living/residential health care facilities. Interpretation 97-8 relates to adequate staffing in ALF/RHCF to provide immediate egress of all residents in an emergency. Interpretation 97-7 discusses management of medications and states that home health agencies may not prefill medication boxes for residents who self-administer oral medications.

The interpretation related to tuberculin skin testing has been revised to allow new employees who can provide a facility with documentation that they have been screened for tuberculosis using the two step method do not have to be retested. The documentation must meet the requirements listed in the interpretation. Guidance for the revision was provided by the Office of Epidemiological Services.

The bureau has been advised by a consultant pharmacist that the Drug Enforcement Agency has revised their policy related to transmission of orders for Control II drugs via facsimile. Therefore, Regulation Interpretation 93-47 has been revised by deleting the statement prohibiting this practice.

Using Signs for Identification

The use of signs to identify a bedroom occupied by a resident with a communicable disease which requires isolation precautions is appropriate. The signs should include language which does not impinge on the dignity and privacy of the resident. It is imperative that all staff and visitors be aware when special precautions must be used to prevent the spread of an infectious disease.

The Centers for Disease Control and Prevention Guidelines published in January 1996 used terminology which could be used for signs. Standard precautions must be used by all staff in their contacts with all residents. If the resident has a condition which requires additional precautions a sign should indicate the type of precautions or instruct visitors and staff to check at the nurses station for instructions.

Preventing Injuries with Bedrails

A recent article in the *Journal of the American Geriatrics Society* contained an article entitled "Deaths Caused by Siderails". This article contains safety recommendations to prevent bedrail related deaths. Every nursing facility is encouraged to obtain a copy of this article. Local libraries can assist staff in obtaining a copy of the journal. The following is the citation for this article.

Parker, K. and Miles, S. (1997). "Deaths caused by siderails", *Journal of the American Geriatrics Society*, 45:797-802, 1997.

Criteria for Designating a Nursing Home as a Poor Performing Facility

The Health Care Financing Administration has revised their definition of a Poor Performing Facility (PPF). The revised definition is as follows:

"A 'Poor Performing Facility' is a facility cited for substandard quality of care (SQC) on the current **standard** survey and had been cited for SQC or immediate jeopardy on at least one of the previous two standard surveys."

The new policy includes a citation of immediate jeopardy in one of the two former surveys. Complaint surveys are no longer included in the determination of a PPF.

Credentialing Update

License renewal and continuing education is a constant concern for adult care home administrators, dietitians, and speech-language pathologists and audiologists licensed by Health Occupations Credentialing. Below is a list of the most frequently asked questions, concerns and answers addressed by credentialing staff. If you have any questions regarding these issues, please contact the Health Occupations Credentialing Unit at (785) 296-0056.

- Q. I attend courses frequently that have not obtained prior approval from KDHE. I want to be sure I receive continuing education clock hours for these programs. How can I ensure that these courses count? When should I send in information on courses that need to be reviewed?**
- A. Please send the request for subsequent approval form for a course that does not have KDHE prior approval within two weeks of attending the course. This would assure that the continuing education was approved, modified, or disapproved before you submit your renewal. It would also speed up the renewal process by about 60 percent as there would be a reduction in the number of subsequent application reviews cumulated at a very critical processing time. This means that your license would issued more quickly.

Q. How do I use the continuing education transcript (CET)?

- A. The CET was developed by KDHE for you to use in keeping a record of the CE activities you've attended and to report your CE at renewal time. Each activity must be documented on the transcript by KDHE approval number, name, and date of the activity, and the number of hours as approved by KDHE. If the program does not have an approval number, contact the sponsor if the program was prior approved, or submit an application for subsequent approval to KDHE for review and an individual assignment number. The CET should be submitted to KDHE with the renewal application at renewal time. All certificates of attendance, subsequent approval applications and program material should be kept in case of audit until after your renewal application is approved.

Q. Is it better for me to renew my license as soon as I get the notice or wait until closer to when it actually expires?

- A. Don't delay in returning your renewal for licensure. Submit your renewal information as soon as possible after receipt of renewal notice so we can process your renewal and issue your license in a timely manner. The faster you submit your renewal request, the faster your license can be issued. Be sure to complete the renewal request form, include fee payment and your CET. If there is a problem, it can be addressed before your license expires. Note: You won't receive your renewal documents if we don't have an accurate address on file. Regulations require licensees to notify the department if there is a change of name or address to alleviate this problem..

Resources for Quality Care

A revised catalog of videos available to adult care homes through the Kansas Public Health and Environmental Information Library is attached to this issue of the *Fact Sheet*. Facilities and individuals may request videos for inservice training and public information. The only cost is that of return postage. Videos may be order via mail, facsimile or E-mail.

In the November/December 1997 issue of the American Journal of Alzheimer's Disease a new book on care of residents with Alzheimer's disease was reviewed. This book would be useful for facilities which provide care to residents in the later stages of dementia. The premise of the book is that care for persons in the late stage of dementia should be palliative care rather than a medical or rehabilitation model of care. Facilities may wish to obtain a copy of this book through their local library.

Late Stage Dementia Care: A Basic Guide, edited by Christine R. Kovach. Published by Taylor & Francis, Washington, DC, 1977, 236 pages.

The American Society of Consultant Pharmacists has an Internet site which contains pertinent information concerning long term care. Two recent articles available on the site were "Putting the MDS 2.0 to Work in Long-Term Care" and "Using the MDS 2.0 to Identify and Monitor the At-Risk Elderly." This information would be valuable for a facility's consultant pharmacy. The Internet address is: www.ascp.com..

The American Medical Directors Association has developed four clinical guidelines for use in long-term care settings. The four guidelines cover depression, heart failure, pressure ulcers and urinary incontinence. One copy of each guideline is only \$6.00. Information on ordering the guidelines can be obtained by contacting the AMDA at (410) 740-4572. A number of facilities in Kansas have ordered the guidelines for their medical directors.

The Kansas Public Health and Environmental Information Library has a copy of Delmar's 1997 Nursing Assisting Services. This is a series of videotapes which can be used to educate nurse aides. There are 22 tapes which cover the basic skills nurse aids need to develop to provide quality care for residents. The series is listed on page four of the KPHEIL catalog which is attached to this *Fact Sheet*.

American Diabetes Association. *Clinical Practice Recommendations*, 1997. Diabetes care 20 (Suppl 1), 1997.

Diabetes Mellitus costs over \$100 billion annually, or 1 of 7 dollars spent on health Care (Fair-Covely, 1997)

Position statement: Primary goals of medical nutrition therapy for diabetes are to improve metabolic control(glucose and lipids), provide appropriate energy, and improve overall health through optimal nutrition. Providing adequate nutrition is the primary concern for the residents of long-term care facilities if malnutrition is to be prevented or corrected. Regular menus in long term care facilities generally are consistent in energy resources, served at consistent times and contain small portions of food. It is appropriate to serve some residents with diabetes the regular menu with consistent amounts of carbohydrates at meals and snacks. If desserts are served, the portions are usually small. J Am Diet Assoc. Jan 1997.

Mail to: Semi-Annual Report/Stat Report
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ANE ISSUE STATISTICS 9/1/97 to 11/30/97
Complaint Calls Assigned for Investigation

ANE Investigations

Total 371

Sep 145

Oct 132

Nov 94

Care Issues Investigated

Total 377

Sep 120

Oct 156

Nov 101

Alleged CNA/CMA Perpetrators - Administrative Review

Total Cases

Reviewed

76

Admon. Ltr

48

Pending

11

Proceeding

8

Registry

9

*Licensure Category	Civil Penalties				Correction Orders			
	1997 Quarters							
	1 st	2 nd	3 rd	4 th	1 st	2 nd	3 rd	4 th
Inadequate or inappropriate hygiene and skin care	9	8	10		52	41	49	
Inadequate or unqualified staffing	12	21	4		48	48	26	
Inoperable or inaccessible call system	-	-	-		1	0	3	
Inappropriate or unauthorized use of restraints	2	-	-		16	8	12	
Unsafe medication administration or storage	4	2	3		16	12	15	
Inadequate nursing services other skin care	12	9	18		65	61	82	
Inadequate or inappropriate asepsis technique	4	1	-		8	6	6	
Inadequate or inappropriate dietary/nutritional services	-	1	-		6	5	9	
Unsafe storage or hazardous or toxic substances	-	-	-		4	0	2	
Failure to maintain equipment	3	5	3		19	15	14	
Resident right violations	8	3	2		43	31	27	
Unsafe high water temperature	-	-	-		5	1	-	
Inadequate hot water	-	-	-		-	0	-	
General sanitation and safety	9	2	2		35	20	17	
Other (including inappropriate admission)	-	1	4		14	13	28	
Inadequate rehabilitation services	-	-	-		-	-	-	
Civil Penalties	44	32	23					
Correction Orders					125	128	129	
Bans on Admission	4	8	8					
Denials	2	1	1					

*A correction order or civil penalty may consist of multiple issues summarized within the licensure categories above.